



CITY OF SANTA CLARA ENCROACHMENT PERMIT APPLICATION

PUBLIC WORKS DEPARTMENT 1500 WARBURTON AVE., SANTA CLARA, CA 95050 TEL.: (408) 615-3000 FAX: (408) 985-7936 E-mail: engineering@santaclaraca.gov

NOTE: THIS IS THE ENCROACHMENT PERMIT APPLICATION FORM. Minimum review time is 3 weeks, depending on complexity of project and Engineering staff workload. It is also the Permittee's responsibility to comply with all insurance requirements prior to issuance of the Encroachment Permit.

SITE INFORMATION (PLEASE FILL OUT AS MUCH INFORMATION AS POSSIBLE):

Project Title: _____

Location Of Work/Address: _____

PROPOSED WORK INFORMATION (CHECK ALL APPLICABLE ITEMS BELOW):

ESTIMATED START OF CONSTRUCTION DATE: ____ / ____ / ____				
<input type="checkbox"/> CLEANOUT	<input type="checkbox"/> DRIVEWAY	<input type="checkbox"/> MONITORING WELL	<input type="checkbox"/> SANITARY SEWER MAIN	<input type="checkbox"/> STORM DRAIN LATERAL
<input type="checkbox"/> COMMUNICATION	<input type="checkbox"/> ELECTRIC	<input type="checkbox"/> PAVEMENT	<input type="checkbox"/> SIDEWALK	<input type="checkbox"/> STORM DRAIN MAIN
<input type="checkbox"/> CURB & GUTTER	<input type="checkbox"/> GAS	<input type="checkbox"/> POTHOLE	<input type="checkbox"/> SOIL BORING	<input type="checkbox"/> WATER
<input type="checkbox"/> CURB RAMP	<input type="checkbox"/> MANHOLE	<input type="checkbox"/> SANITARY SEWER LATERAL	<input type="checkbox"/> OTHER: _____	
DETAILED DESCRIPTION OF WORK: _____				
DESCRIPTION OF ATTACHED PLANS: _____				No. of Sheets: _____
ESTIMATED CONSTRUCTION COST (attach estimate with application): \$ _____ Your Job No.: _____				

OWNER/APPLICANT INFORMATION:

NAME: _____	PHONE NUMBER: _____
ADDRESS: _____	CELL PHONE: _____
_____	FAX NUMBER: _____
_____	EMAIL: _____

ENGINEER/CONSULTANT INFORMATION:

NAME: _____	PHONE NUMBER: _____
ADDRESS: _____	CELL PHONE: _____
_____	FAX NUMBER: _____
_____	EMAIL: _____

PERMITTEE INFORMATION:

NAME: _____	PHONE NUMBER: _____
CONTACT PERSON: _____	EMERGENCY NO.: _____
ADDRESS: _____	FAX NUMBER: _____
_____	EMAIL: _____

NOTE: Permittee must have the following documentation prior to issuance of an Encroachment Permit:

1. Current business license with the City of Santa Clara. Call the Business License Unit @ (408) 615-2310 for an application or visit City website <http://www.santaclaraca.gov/>
2. Insurance documents in compliance with minimum requirements. Call Engineering Department @ (408) 615-3000 for the minimum requirements and to register for an Ebix account, if necessary.

INITIAL ENCROACHMENT PERMIT FEES (NON-REFUNDABLE):

PROCESSING FEE _____	PARTIAL PLAN CHECK FEE – STREET _____
PARTIAL PLAN CHECK FEE – ENGINEERING _____	PARTIAL PLAN CHECK FEE – STREET (PKWYS & BLVDS) _____
PARTIAL PLAN CHECK FEE – ELECTRIC _____	PARTIAL PLAN CHECK - WATER _____
TOTAL: _____	

SUBMITTAL INFORMATION:

APPLICANT'S SIGNATURE: _____	DATE: ____ / ____ / ____
PRINT APPLICANT'S NAME: _____	

FOR OFFICE USE ONLY:

APPLICATION ACCEPTED BY: _____	DATE: ____ / ____ / ____
(City Engineer or Designee)	Signature _____ Print Name _____



ENCROACHMENT PERMIT (EP) PROCESS Flowchart & Checklist

Applicant

PLAN REVIEW:

- ☐ 1. **FILL OUT EP APPLICATION AND SUBMIT APPLICATION ALONG WITH 7 COPIES OF COMPLETE CONSTRUCTION PLANS FOR REVIEW**
(see page 2 for Plancheck list)

[NOTE: Please allow a MINIMUM of 3 weeks for each review cycle, depending on complexity of project and staff workload.]
- ☐ 2. **PROVIDE CONSTRUCTION ESTIMATE BREAKDOWN**
(only for work in the public right-of-way)
- ☐ 3. **PAY INITIAL EP FEES**
(Processing and partial plan check fees.)
- ☐ 4. **PLANS APPROVED BY CITY**
(Provide 4 final copies; 3 for City records and 1 returned to applicant upon EP issuance.)

PRE-PERMIT ISSUANCE:

- ☐ 5. **CONTRACTOR MUST HAVE CURRENT CITY BUSINESS LICENSE**
- ☐ 6. **CONTRACTOR INSURANCE IN COMPLIANCE WITH EP REQUIREMENTS**
 - Call (408) 615-3000 Land & Property Development Division (LPD) to register for an Ebix account.
 - FAX or EMAIL insurance documents to Ebix @ (770) 325-0409 or ctsantaclara@ebix.com (see page 3)
 - Call Ebix @ (951) 766-2280 to verify compliance with requirements

PERMIT ISSUANCE:

- ☐ 7. **PAY EP FEES @ FINANCE DEPARTMENT**
(see page 4 for fee schedule)
- ☐ 8. **PERMIT ISSUED**
[NOTE: Work may proceed only AFTER two working days and permittee notifies the Public Works Inspector at least one (1) full City working day.]

CONSTRUCTION:

- ☐ 9. **CALL USA @ 811 or 1-800-227-2600**
- ☐ 10. **CALL ENGINEERING FIELD SERVICES DIVISION @ (408) 615-3000 AT LEAST 24 HOURS IN ADVANCE OF WORK.**
- ☐ 11. **FIELD SERVICES DIVISION SIGNS OFF EP UPON COMPLETION OF WORK.**

Notes:



ENCROACHMENT PERMIT (EP) Plancheck List

In order to meet approval, plans submitted for review shall include the following minimum items, unless otherwise noted or not applicable. This checklist does not preclude the use of the City of Santa Clara (CSC) Design Criteria handbook (available online) to aid in preparing plans for construction in the public right-of-way and City easements, nor to take responsibility for professional engineer's work. For additional information or questions on EPs, call the Land & Property Development Division @ (408) 615-3000.

NOTE: ONLY FIRST TEN ITEMS APPLY FOR MINOR EP CONSTRUCTION WORK SUCH AS DRIVEWAY INSTALLATIONS/MODIFICATIONS and/or WIDENINGS

No.	Item Description	Yes	No	N/A
►	FIRST SHEET/PAGE REQUIREMENTS:			
1.	Title of Project (with brief description of work to be done in public right-of-way, if not specifically indicated in Title)			
2.	Assessor's Parcel Number (APN) and complete address of Project, or nearest address			
3.	Location Map (photocopies of common road maps or topo maps are generally NOT acceptable) and North arrow			
►	GENERAL REQUIREMENTS:			
4.	Plans legibly drawn and adequately dimensioned			
5.	Plans drawn to scale, no smaller than 1" = 40' for horizontal and 1" = 4' for vertical			
6.	Construction Notes, Legend, and dimensions are clear			
7.	ID all streets, right-of-way widths, centerlines and face-of-curb to property-line distances			
8.	Location of proposed construction referenced to cross streets and street centerline or right-of-way line or property line.			
9.	Location and dimension of existing curb, gutter, sidewalk, driveways and pavement. Other existing facilities shall be shown in sufficient detail to identify areas of potential conflict.			
10.	Show all curb, gutter, sidewalk and pavement to be removed and replaced in sufficient detail to compute an accurate area.			
11.	Elevations referenced to City benchmark (call Engineering @ (408) 615-3000 and have address or APN ready)			
12.	Continuous stationing, for projects exceeding 100' in length.			
13.	Profile drawing of all proposed underground facilities to be installed by open cut, push or bore method, complete with location of existing crossing utilities.			
14.	For proposed utility line, indicate material (RCP, VCP, PVC, etc.), size & slope			
15.	Reference depth of trench to existing top of curb. If no curb exists, reference shall be made to the crown or centerline of street.			
16.	Detail of trench section(s) properly dimensioned, including proposed facilities, width and depth of excavation, backfill methods and materials proposed, and structural pavement section and surface treatment in unpaved areas (Reference may be made to City Standards).			
17.	Location and depth of all existing parallel and transverse electric, water, gas, sanitary sewer and storm drain facilities, except local lateral services, which are within the working area of the proposed construction.			
18.	Final plans signed by responsible engineer of work. Plans submitted for review may be stamped "For Review Only".			

NOTE:

Please allow a MINIMUM of 3 weeks for review, depending on complexity of project, staff workload, and compliance with insurance requirements.



ENCROACHMENT PERMIT (EP) Insurance Requirements

The Insurance Certificate must:

- * Be an original document.
- * List all subsidiaries or DBA's covered by the certificate provided.
- * Provide at least 30 days notice of cancellation.
- * Show complete insurance carrier names as listed in the A.M. Best Property & Casualty Guide
- * Be completed in its entirety and signed. Binders are not acceptable.

➤ **Commercial General Liability (CGL)**

- Occurrence form – requires coverage not less than:
\$1,000,000 General Aggregate
\$1,000,000 Products and Completed Operations Aggregate
\$1,000,000 Personal and Advertising Injury
\$1,000,000 Each Occurrence
- * Coverage must be placed with a carrier rated not less than A- VI by A.M. Best & Co.
- * Additional Insured Endorsement Required. Attach a CG 2026 11/85 Additional Insured Endorsement, or the combination of CG 20 10 03 97 & CG 20 37 10 01, or its equivalent [Note: if equivalent is submitted, anticipate longer review period for City Attorney's Office Approval]
- * Additional Insured Wording must read: The City of Santa Clara, its City Council, commissions, officers, employees, agents and volunteers.
- * Coverage must be **Primary** and Non-Contributory above any other insurance The City of Santa Clara, its City Council, commissions, officers, employees, agents and volunteers may carry.

➤ **Commercial Automobile Liability:**

- Must indicate coverage for Any Auto or Owned, Hired or Borrowed, and Non-owned Vehicles
\$1,000,000 Combined Single Limit
\$1,000,000 Bodily Injury per Accident
- * Coverage must be placed with a carrier rated not less than A- VI by A.M. Best & Co.

➤ **Workers' Compensation:**

- State Statutory Limits
- Employers' Liability Coverage
\$1,000,000 Each Accident
\$1,000,000 Disease – Policy Limit
\$1,000,000 Disease – Each Employee

➤ **Certificate Holder:**

City of Santa Clara – Engineering Department
c/o Ebix BPO – Insurance Compliance
P.O. Box 12010-S2 or 151 North Lyon Avenue
Hemet, CA 92546-8010 Hemet, CA 92544-3831

For Customer Service and inquiries:

Phone: (951) 766-2280

email: CTSantaClara@ebix.com

IMPORTANT: Fax or email insurance documents for compliance & verification to:

Fax: (770) 325-0409 (PLEASE DO NOT FAX TO CITY OF SANTA CLARA – ENGINEERING DEPT.)

- **PLEASE READ:** Engineering does NOT review insurance documents. **IT IS THE APPLICANT'S and/or CONTRACTOR'S RESPONSIBILITY TO MEET ALL THE MINIMUM INSURANCE REQUIREMENTS LISTED ABOVE.** Call Ebix BPO Customer Service to verify if the documents have been reviewed and cleared, prior to issuance of the EP. Clearance of insurance documents typically takes a MINIMUM of two weeks.



**ENCROACHMENT PERMIT (EP)
FY 2017-2018 (Effective on 07-1-2017)
Engineering Department Fees, Rates & Charges**

Encroachment Permit Processing Fee:

Public improvements cost up to \$15,000	\$ 351.00
Public improvements cost over \$15,000	\$ 468.00

Engineering Plan Review Fee:

Public improvements cost up to \$15,000 (fee includes 3 checks)	\$ 351.00/plans set
4 th and each of the subsequent checks	\$ 117.00/plans set

Public improvements cost over \$15,000 (fee includes 3 checks)	\$ 1,229.00/plan sheet
4 th and each of the subsequent checks	\$ 117.00/plan sheet

Engineering Inspection Fee:

Public improvements cost	
\$0 - \$15,000	\$ 351.00
\$15,001 - \$25,000	\$ 1,405.00
\$25,001 - \$50,000	\$ 3,511.00
\$50,001 - \$100,000	\$ 5,851.00
\$100,001 - \$200,000	\$ 9,361.00
\$200,001 - \$500,000	\$ 19,892.00
\$500,001 - \$1,000,000	\$ 39,784.00
Greater than \$1,000,000, for every additional \$500,000 or fraction thereof	\$ 12,871.00

Water Inspection Fee:

Public improvements cost	
\$0 - \$15,000	\$ 262.00
\$15,001 - \$25,000	\$ 1,047.00
\$25,001 - \$50,000	\$ 2,618.00
\$50,001 - \$100,000	\$ 4,364.00
\$100,001 - \$200,000	\$ 6,983.00
\$200,001 - \$500,000	\$ 14,838.00
\$500,001 - \$1,000,000	\$ 29,678.00
Greater than \$1,000,000, for every additional \$500,000 or fraction thereof	\$ 9,601.00

Electric Plan Review Fee (fee includes 3 checks)	\$ 300.15/plan sheet
4 th and each of the subsequent checks	\$ 44.51/plan sheet
(Applies to permit that have no electric service request & review for conflicts with existing electric infrastructure)	

Street Plan Review Fee (fee includes 3 checks)	\$ 114.89/plan sheet
4 th and each of the subsequent checks	\$ 23.81/plan sheet

Street Plan Review Fee for Parkways & Boulevards (fee includes 3 checks)	\$ 114.89/plan sheet
4 th and each of the subsequent checks	\$ 23.81/plan sheet

Water Plan Review Fee:

Public improvements cost up to \$15,000 (fee includes 3 checks)	\$ 262.00/plans set
4 th and each of the subsequent checks	\$ 87.00/plans set

Public improvements cost over \$15,000 (fee includes 3 checks)	\$ 916.00/plan sheet
4 th and each of the subsequent checks	\$ 87.00/plan sheet
(Applies to permit that have no water service request & review for conflicts with existing water infrastructure)	

Field Marking (U.S.A.) Fee:

A. Sanitary Sewer	
First 50' of Excavation	\$ 105.00
Each Additional Lineal Foot.....	\$ 1.32
B. Storm Drain	
First 50' of Excavation	\$ 104.00
Each Additional 50' or fraction thereof	\$ 68.00
C. Electric	
First 50' of Excavation	\$ 132.48
Each Additional 50' or fraction thereof	\$ 87.98
D. Electric - Fiber	
First 50' of Excavation	\$ 132.48
Each Additional 50' or fraction thereof	\$ 87.98
E. Water	
First 50' of Excavation	\$ 137.00
Each Additional 50' or fraction thereof	\$ 137.00
F. Recycled Water	
First 50' of Excavation	\$ 137.00
Each Additional 50' or fraction thereof	\$ 137.00

Slurry Seal Fee:

Per Application	\$ 1.88/sq. ft.
	Minimum Fee \$86.00)

Record Drawing Archiving Fee:

Per Sheet (if applicable)	\$ 66.00
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